Disclosure Report Cover Use this form for general report and committee information, Do not use this form to undate information				nust be	OCT 02 2	014 uhmitted alo	Amenda	
The second secon	THE TO WPULLED II	nformation.			0.6	dominica a.e.	ilg with othe	r detalled forms.
1. Committee Info	ormation							102
							c. ID Numbe	r
b. Mailing Address (in	r Bo	Richard	<u> </u>					
							d. Date Filed	
	Dixor							2-14
9599 - 55,595,000		C 2804	te (3 20)				e. Phone Nun	
2. Report Year 3.	Period Start	Date (mm/dd/yy	4. Period	End Dat	e (mm/dd/yy)	5 Treasure	er Full Nam	→ Carethy A
2014	1-2-	14		2-1		Donce	ar Edi	vards
6. Type of Commi	ttee (Check C	- District	Type of Rep		Charles and the second of the			
Candidate Campai	ign 🔲 Part	y Mı	unicipal		State/County	OF THE PERSON NAMED IN COLUMN TO PERSON NAME	Referendum	cuiegory
PAC		erendum	Organizationa	al	Organizati	ional	Organiza	tional
Independent Exper			Thirty-five da	ay	Quarterly		Pre-refere	
Legal Expense Fun	ıd		Pre-primary		☐ First		Final	***************************************
					☐ Secon	nd		ental Final
7. Type of Fund	(if applicable,	check one)	Pre-runoff		Third	i	Annual	
Booster Fund			Semi-annual		☐ Fourt	th	☐ Special	
☐ Building Fund		<u> </u>	Mid Yea	ar	Semi-annu	ıal	-	
		I	Year End	ıd	Mid '	Year	10. Special	Report Name
Other:] Final		☐ Year	End		
8. Number of Fund	draisers this	Report	Special	1	☐ Final			
	Action Residence Constitution of the Constitut			1	☐ Special			
11. Account Inform		and the second	#10 July 20	111. Acc	ount Inform	ation	SHEETS NO	
a. Financial Institution	Full Name				cial Institution			And the section
TD Ban	K		718 18 14					
b. Purpose		c. Account Code		b. Purpos	se		c. Account Co	de
224 2210							Management	
campaig	n	d. Period Begin Ba	alance	1			d. Period Begi	n Ralance
25 ∓ 36 ~~~		\$=0.00	0	l		I	\$	H Dunie
CERTIFICATION	J	*		<u></u>			Þ	
I certify that the Cor of the NC General S report is complete, to	mmittee or Fund Statutes and that	t no funds are con	nmingled with	prohibite	ed or other non	i-disclosed for	& 22D-22M nds. I further	of Chapter 163 certify that this
The second secon	ed Name of Signe	rds_	Sig	Leur nature of A	Appointed Treasu	L urer	Qat	2,2014 Date
FOR OFFICE USE	EONLY		1			A transport		
Date Received:	10	1-2-14	Employ	yee: _	DL	- 🗆	very Method Normal Mai	i
Date Postmarke	d:		Employ	yee: _			Registered N Hand Delive	ered
Date Scanned:			Employ	vee:		□ ')	Electronicall	y Filed

Signer has not received mandatory training Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Employee:

Employee:

Date Data Entered:

Detailed Summary

Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment

☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. Type of		3. ID Number		
Roger Bo Richard	organ	nieatrina)	3		
Start of Election Cycle: January 1, 2014	_	Total this Reporting Period	Total this Election Cycle		
4) Cash on Hand at Start		\$==0.00			
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 50.00	\$ 50.00		
6) Contributions from Individuals	(CRO-1210)	\$ 1147.03	\$1147.03		
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$		
8) Contributions from Other Political Committees	(CRO-1230)	s	\$		
9) Loan Proceeds	(CRO-1410)	\$	\$		
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	s		
11) Other Receipt Sources		Selection of the			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$		
11b) Contributions from Not-For-Profit Organizations		\$	\$		
11c) Outside Sources of Income	(CRO-1250)	\$	s		
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$		
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$		
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c	- A	(5)	\$ 1197.03		
EXPENDITURES			J & M (K C)		
13) Disbursements		等。社会基础的发	(17 M X 4 M S		
13a) Operating Expenditures	(CRO-1310)	\$ 465.67	\$ 465.67		
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$		
13c) Coordinated Party Expenditures	(CRO-1310)	\$	s		
(4) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$		
(5) Loan Repayments	(CRO-1420)	\$	\$		
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	\$		
(7) In-Kind Contributions	(CRO-1510)	\$ 62.03	\$ 62.03		
8) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1		\$527.70	\$ 527.70		
9) Cash on Hand at End (Add lines 4 and 12 together, then su		\$ 669.33	\$ 66 9.33		
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$			
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$			
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$			
4) Account Transfers Within the Committee	(CRO-1720)	\$			
5) Administrative Support	(CRO-1710)	\$	\$		
6) Forgiven Loans	(CRO-1440)	\$	\$		
7) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$		
8) Contributions to be Refunded	(CRO-1215)	\$	\$		

A	ggreg	Amendment Yes No							
O	Optional form used to report NC Contributions From Individuals of \$50 or less								
1.	1. Committee Full Name (and Fund if applicable)								
L	Ro	ger Bo	Richard			Value of the second			
3.	Contribu	itor Information	n						
a. A	Amend Add	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount			
E	Remove Add		cash		8-14-14	\$ 20.00			
	Remove Add			signs	8-15-14	\$ 30.00			
	Remove Add					\$			
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<u> </u>	Remove	1 11 5				\$			
		ly this Page	202		\$	50.00			
(Th	Total of ALL CRO-1205 Pages This line must be on line 5 of Detailed Summary Page CRO-1100) \$ 50.00								

Con	tributions f	rom Individua	als	Pf	g <u>l</u> of <u>2</u>	3	Amendment Yes No			
Use th	is form to report i	individual contributio	ons over \$50 or c	contributions und	der \$50 if form C	RO	1205 is not used			
1. Co.	Amintee Full [48]	me (and rund ii app	olicable)		图 图 沙里亚		ID Number			
		Bo Richar	d							
	3. Contributor Information Add Remove a. Full Name, Mailing Address & Phone In Loh Title/Profession									
(inclu	ude city, state, & zip))		b. Job Title/Profe		d. C	Comments			
1	Roger Bo	Richard		self-en	mpbyed					
2	40 DIXE	on Rd		c. Employer's Nar		1				
ے ا	: 16 mboro	NC 2804	0							
٦	TENDOI O	NC ZOUT	U	Carpent	·^7		lection Sum to Date			
f. Prior	g. Account Code	IL E	T. C. C. C.			\$	232.03			
	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yy	уу)	k. Amount			
		cash	ļ , , , , ,		1-2-14	ŗ.	\$100.00			
빝		Cash	photoco	pies	1-2-14		\$ 32.03			
		Cash	100	}	5-9-14	-	\$100.00			
	tributor Informa Name, Mailing Addres			Control of the Contro	move					
	de city, state, & zip)	ss & Phone		b. Job Title/Profes		d. Comments				
	West of the state	10		manu fac	tures					
	arl Rams									
228 Rollins St Many Facturing						- Fl				
٢	over C+	4 NC 281	043	Manufacturing company			e. Election Sum to Date			
f. Prior		-	i. In-Kind Descript			\$	60.00			
	8		I. III-Kiiiu Descripi	333		y)	k. Amount			
		check			8-14-14	_	\$ 60.00			
							\$			
		<u> </u>					\$			
	tributor Informat			Add Rem	nove	傳動。				
	ame, Mailing Address	s & Phone		b. Job Title/Profess	sion	d. Co	omments			
	le city, state, & zip)			retired						
1/((chael Je	Lunings	f	c. Employer's Name						
Bo;	x 904 lenboro N	10 2 for 0		manufact compa	turing	e. Ele	ection Sum to Date			
					ny	\$	225.00			
f. Prior	g. Account Code h	h. Form of Payment	i. In-Kind Descripti	ion .	j. Date (mm/dd/yyyy	y) l	k. Amount			
		check			8-14-14		\$ 100.00			
		check			9-26-14		\$ 125.00			
			Action Committee	7.000, 500, 500, 500, 500, 500, 500, 500,			\$			
4. Tota	al only this Pag	ge	er en			\$	517.03			
	al of ALL CRO				50 S. C. A. C. C. C. C.					
(This lin	te must be on line 6 o	of Detailed Summary Page	CPO 1100)	ALCOHOLD SHOWEN		\$	1147.03			

Conf	tributions fi	2 of 3	2	Amendment			
Use thi	is form to report i	individual contribution	ons over \$50 or c	rg contributions und	ler \$50 if form C	<u>2 </u>	Yes No 1205 is not used
r. Con	unittee Full Nan	ne (and Fund if app	olicable)				ID Number
	Koger Be	o Richard					
	tributor Inform		SWIN.	Add Ren	move		
	Vame, Mailing Addre de city, state, & zip)			b. Job Title/Profe		d. C	Comments
				self-e	mplayed		
10.500	uncan Eda	2000 j.j 1 j.j		c. Employer's Nar		1	
7.0 0-0.0	2 Duncan			FRANK	- 4.3	E	lection Sum to Date
Rυ	that tonet	on MC 281	34	termin	J	\$	BQ.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	122	k. Amount
		cheek			_		\$ 80.00
1		C	-		9-10-14		
E							\$
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40 00 00 Market 10 Market	tributor Informa	1500		35,000	move		
	ame, Mailing Addre le city, state, & zip)	ss & Phone		b. Job Title/Profes		d. C	omments
		Risa II.		retire			
Hattle Keller 1294 Ellenboro-Henrietta Rd				c. Employer's Name/Specific Field			
129	4 Ellenbore	,-Hennetta i	Œ	teaching			ection Sum to Date
EI	lenboro MI	20090					/00.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	j. Date (mm/dd/yy		y)	k. Amount
		check			8-28-14		\$ 100.00
							\$
							\$
	ributor Informa			Add Ren	And the second second second second		Opinion and the second
	ame, Mailing Addres le city, state, & zip)	ss & Phone		b. Job Title/Profes		d. Co	omments
		manus 93		retire	d		
	e Stock			c. Employer's Name/Specific Field			
130	· 1001	UC 28040		auctione	26	e. El	ection Sum to Date
61,	kny aro 1	16 20040				\$	200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descript	tion	j. Date (mm/dd/yyy		k, Amount
		chock			9-22-14		\$ 200.00
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						+	\$
4 Tota	al only this Pa	ara a					
ACTION AND ADDRESS OF THE PARTY		O-1210 Pages				\$	380.00
		of Detailed Summary Pa	ige CRO-1100)			\$	

Cont	tributions f	rom Individua	als	Pg	3 of 3		Amendment Yes No	
Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used								
1. Con	mittee Full Nan	ne (and Fund if app	olicable)				D Number	
		o Richard						
	tributor Inform		100		move	TOTAL C	的复数形式的现在分词	
	lame, Mailing Addr de city, state, & zip)			b. Job Title/Profe	ssion	d. C	Comments	
				retire	q			
H	enry Edw	ards Rd on NC 28131		c. Employer's Nar	ne/Specific Field			
7	22 Duncoun	KN	<u>.</u>	C	-			
R	u therfood to	on MC 28131	4	Form	ung	e. Election Sum to Date		
						\$	25000	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descri	ption	j. Date (mm/dd/yyy	y)	k. Amount	
		check			9-25-14		\$250.00	
							\$	
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	tributor Inform				nove			
	ame, Mailing Addre le city, state, & zip)	ess & Phone		b. Job Title/Profes	ssion	d. C	omments	
(IIICIU)	re city, state, & zip)	61 (2) 31 (2) (3) (4) (4) (4) (4) (4) (4) (4		-				
				c. Employer's Nan	ne/Specific Field			
						e. El	ection Sum to Date	
c D.:	I	h				\$		
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		200					\$	
3. Cont	ributor Informa	ntion		Add Ren	nove		BELLEVILLE PROPERTY.	
17 / Ann III An Trod III (190	ame, Mailing Addre	ss & Phone		b. Job Title/Profes	sion	d. Co	omments	
(includ	e city, state, & zip)							
				c. Employer's Nam	ne/Specific Field			
						e. Ele	ection Sum to Date	
						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	y)	k. Amount	
							\$	
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	al only this Pa					\$	250,00	
		O-1210 Pages	ana			\$		

Disbursen	nents				D _o		Amendment	
Use this form t	o report expenditures	from the commi	ttee for	operating ev	Pg o	tions to s	Yes	☐ No
COMMITTEE S HITE	2 coordinated party e.	xpenattures		operating cx	penses, contribu	tions to c	andidate/poli	tical
1. Committee	Full Name (and Fun	nd if applicable)		用的特别	A CONTRACTOR OF THE PARTY OF	2.	ID Number	
	ger Bo Ri	chard						
3. Type of Dis		e use separate C	RO-131	0 forms for	each type of Dis	burseme	nt.)	
Operating Ex	penses Co	ntributions to Candid	lates/Polit	ical Committee			Party Expenditure	es
4. Payee Infor	CONTRACTOR			Add	Remove	a de		
The second secon	Mailing Address & Pl	none		b. Coordina	ted Committee Nan	ne d. C	Comments	
(include city, state	-							
Bo	E			a I and Dec	:			
205	? Fair yrou	nd Rd		Federal	istered (Specify) County:			
-10	? Fairgroundule NC	281/0		State	Municip		lection Sum to	Data
Spir	ndule NC	20100						
						\$	66.95	
f. Account Code	g. Form of Payment	h. Purpose Code		(mm/dd/yyyy)		k. Requi	red Remarks	
	check	K	6-	6-14	\$ 66.95	F	iling Fe	e
					\$		J	
4. Payee Inform	mation			Add \square	Remove	561 (a.y. 63)		i ka sa
	ling Address & Phone		000000	ETZIONINGS (STERRING)	ed Committee Nam	e d C	Comments	
(include city, sta	ite, & zip)				The Committee Thank	u. c	onments	
-	77 1.							I
	Bank berfordton			c. Level Regi	stered (Specify)	700		
				Federal	County:			
Ruth	er fond ton	NC		State	Municip	ality: e. E	lection Sum to I	Date
•						\$	71.80	4
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	i. Amount	k. Requi	red Remarks	
	debit	K			\$ 15.86	che		
	debit	/c	1-2					
			70 8	-31-14	\$ 56.00	Mont	hly service	charge
4. Payee Inform				Add	Remove		建	
a. Full Name, Mail (include city, sta	ing Address & Phone			b. Coordinate	ed Committee Name	e d. C	omments	AND THE
Rother	fond Week	< l ₄		c. Level Regis	stered (Specify)	_		
99.00 · 10.00		,		Federal	County:	_		
				☐ State	Municipa	lity: e. El	ection Sum to D	ate
						\$	71 01	
f. Account Code	g. Form of Payment	h. p					76.86	
i. Account Code		h. Purpose Code		mm/dd/yyyy)			ed Remarks	
	check	B	8-2	6-14	\$ 76.86	•	cards	
					\$			
5. Total only th	is Page			1. 1000 图像		\$	215.67	
6. Total of ALI	CRO-1310 Pages		Y 54				2.7.07	
	line 13a of Detailed Sum	mary Page CRO-11	00 if Oper	rating Expense			4.64	_
(This line goes in	line 13b of Detailed Sum	mary Page CRO-11	00 if Cont	trib to Candida	tes/Political Comm) \$	465.67	′ I
(This line goes in	line 13c of Detailed Sum	mary Page CRO-110	00 if Coor	dinated Party	Expenditures)			
7. Purpose Co	odes (List detailed	expenditure code	in (h.)	above)			491	
A* - Media	B* - Printin	g	C* - Fu	indraising	D - To A	Another (Candidate	STATE OF THE STATE
E - Salaries	F* - Equipn			itical Party	Н* - Но	lding Pu	ıblic Office E	Expenses
- Postage O* Other	J - Penaltie	S	K* - Of	ffice Expens	ses Q* - Do	nation t	o Legal Expe	nse Fund
CHICATOR STATE AND A MARKET AND A STATE OF THE AREA OF	e detailed evaloactic		USEG TERM	C.I.I.O.S	EDINGS MET WAY JUNGHURGE	ESPESSIONES	North Park Park Park	

Disbursem	ents				Pg of	•	Amendment	п.,
Use this form to	report expenditures	from the commit	tee for o	perating ex	penses, contribu	tions to c	Yes	∐ No ical
committees and	coordinated party ex	penditures		· Peruting en	penses, controu	tions to c	andidate/point	icai
1. Committee 1	Full Name (and Fun	d if applicable)	100			2.	ID Number	
	Bo Richard							
3. Type of Dist		use separate Cl	RO-1310	forms for e			CONTRACTOR PROPERTY.	
Operating Exp	THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAME	tributions to Candid	ates/Politi			ordinated I	Party Expenditure	S
The second secon	nation Iailing Address & Ph		L	Add	Remove			TEST LAND
(include city, state		one		b. Coordinat	ed Committee Nan	1e d. (Comments	
	GY Radie st City N			a Lavel Paci	istered (Specify)			
				Federal	County:	SOLUL		- 1
_		سر		State			Election Sum to I	ate
1-010	st City 19	C			-	\$	Trip one Western Maller	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Requi	red Remarks	
	check	A	9-2	6-14	\$ 250.00	rai	lie ads	:
		11			\$			
4. Payee Inform	nation		' п	Add \square	Remove	345 P. S.	A MARKET SERVICE	
	ing Address & Phone	2	100000		ed Committee Nam	e d. C	Comments	Official Males and
(include city, sta	te, & zip)							
								- 1
					stered (Specify)			
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T - 40 T- 410 T- 20 C- 20 T-						\$		
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4 D. T.								
4. Payee Inform	nation ing Address & Phone	S GIRE	L		Remove	alesta (183)		Services of
(include city, star				b. Coordinate	ed Committee Nam	e d. C	Comments	11-1-12-12
(morate eng) but	ic, cc zip)					- 1		
				c. Level Regis	stered (Specify)			
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				State	Municipa	ality: e. E	lection Sum to D	ate
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	B		Date (i	iiiii da jijiji	\$	III Acqui	red Remarks	
						-		
					\$	<u></u>		
5. Total only th	is Page					\$	2500	0
6. Total of ALI	CRO-1310 Pages	Marine Contract			A Paragraph	***************************************		
	line 13a of Detailed Sum					\$		
	line 13b of Detailed Sum)		
	line 13c of Detailed Sum				Expenditures)			
	odes (List detailed					all average		POST COLUMN
A* - Media E - Salaries	B* - Printin F* - Equipn			indraising			Candidate	
I - Postage	J - Penaltie			itical Party ffice Expens			ublic Office E to Legal Expe	
O* Other	g romanic	-	01	The Expens	Q Di	onation i	o Legai Expe	use runa
* Codes require	e detailed explanation	on in required r	emarke	field (k)	A Personal Property of the Party of the Part	TO STATE OF THE ST		

In-Kind Contributions Use this form to report non-monetary contributions, donations, good	Pg ls or services provi	of	tee o	Amendment Yes No r fund.
Use CRO-1215 if In-Kind Contributions were or will be refun	ded within 7 day	s.	(Alleren)	
1. Committee Full Name (and Fund if applicable)	分类是特别的		2. I	D Number
Roger Bo Richard				
3. Contributor Information a. Full Name, Mailing Address & Phone	Add Ren b. Type of Contrib		- 6	
(include city, state, & zip)	Individual	utor	c. C	omments
Roger Bo Richard 240 DIXON Rd Ellenboro NC 28040	Candidate Party PAC			
240 DIXON KU	Referendum		d. E	lection Sum to Date
	Other Receipt	Source	\$	32.03
e. Description		f. Date (mm/dd/yyy	/y)	g. Fair Market Amount
photo capies		1-2-14		\$ 32.03
2				\$
				\$
3. Contributor Information	Add 🔲 Ren	nove		
a. Full Name, Mailing Address & Phone	b. Type of Contrib	utor	c. C	omments
(include city, state, & zip)	Individual Candidate Party PAC Referendum		3.75	Let's C. A. D.
	Other Receipt	Source	\$	lection Sum to Date
e. Description		f. Date (mm/dd/yyy	(y)	g. Fair Market Amount
SIGNS		8-15-14		\$ 30.00
				\$
				\$
3. Contributor Information	Add Ren	nove		
a. Full Name, Mailing Address & Phone	b. Type of Contrib	utor	c. Co	omments
(include city, state, & zip)	Individual Candidate Party PAC			
	Referendum	AST	d. El	lection Sum to Date
	Other Receipt		\$	
e. Description		f. Date (mm/dd/yyy	y)	g. Fair Market Amount
3				\$
				\$
				\$
4. Total only this Page			\$	6203
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)			\$	6203